

## RECEIVED

Judith M. Svenson Suzanne M. Fitch OF COUNSEL

2012 OCT 26 AM 8: 24

FEC MAIL CENTER

October 19, 2012

Federal Election Commission 999 E. St., NW Washington DC 20463

To whom it may concern:

Enclosed please find a Statement of Organization related to my client's new Super PAC, Exposing Marxists PAC.

This committee intends to make unlimited independent expenditures, and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

While I represent the founder of the PAC, David Aouff, all notices should be addressed to either Mr. Acuff, 503 W. Happfield Drive, Apt. 203, Arlington Heights IL 60004-7119, or the PAC Treasurer, Mr. John Hilt, at 4051 S. Sacramento, Apt. 2F, Chicago IL 60632.

Thank you for your attention to this matter. Please feel free to contact me with any questions.

Very truly yours,

**SVENSON LAW OFFICES** 

A. Christine Svenson

**Enclosures** 

cc: David Acuff (with enclosures)

## 12050933413

## STATEMENT OF

RECEIVE

FORM 1		ORGANIZA	ATION	7012 OCT 26 AM 8: 24
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
[Exposin	g, Mar	$t_1$ x, $t_1$ s, $t_1$ s, $t_1$ P,A	<b>C</b>	
ADDRESS (number an	d street)	10,3 W, HAP	P,F,I,E,L,D, ,D,R,	, A,P,T, 2,0,3, , , , , , , , ,
☐ <b>(Check if ad is changed)</b>				
	L	l <u>itilingitioini</u> CITY▲	Hie i ghitis	STATE $\triangle$ $[6,0,0,4]$ - $[7,1,1,9]$ $[7,1]$
COMMITTEE'S E-MAI	L ADDRESS			
(Check if ac is changed)	ddress	hilt95ey	a, h, o, o, e, C, om,	
	O	ptional Second E-Mail Add	ress	
	L			
(Check if at is changed)				
2. DATE 10 17 2012				
3. FEC IDENTIFICA	ATION NUMB			
4. IS THIS STATEM	ENT 🌡	NEW (N) OR	AMENDED (A)	
i certify that I have ex	amined this S	tatement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of	Treasurer	John Hil	<u> </u>	
Signature of Treasurer	4	tole P.	Hilf-	Date 10 19 2012
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office Use			For further information of Federal Election Commissi Toll Free 800-424-9530	

FEC F	Form 1 (Revised 02/2009) Page	2						
TYPE OF (	COMMITTEE							
Cendidat	ndidate Committee:							
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)							
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)							
Name of Candidate								
Candidate Party Affiliat	Office State Sought: House Senate President District							
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name of Candidate								
Party Co	ommittee:							
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican,							
Political /	Action Committee (PAC):							
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organ	nization is a:						
	Corporation w/o Capital Stock Labor Orga	anization						
	Membership Organization Trade Association Cooperative	e						
	In addition, this committee is a Lobbyist/Registrant PAC.							
(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun committee. (i.e., nonconnected committee)	nd or party						
	In addition, this comnilttee is a Lebbyist/Registrant PAC.							
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)							
Joint Fun	ndraising Representative:							
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more pocommittees/organizations, at least one of which is an authorized committee of a federal candidate.	olitical						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more po committees/organizations, none of which is an authorized committee of a federal candidate.	olitical						
Con	mmittees Participating in Joint Fundraiser							
1.		7 7						
2.								
<b>3</b> .								
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1							
FEC Form 1 (Revised	02/2009)	Page 3					
Write or Type Committee Name							
Exposing Marxists PAC							
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor							
Mailing Address							
		!-! !					
	CITY STATE	ZIP CODE					
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Le	adership PAC Sponsor					
<ol> <li>Custodian of Records: Idea books and records.</li> </ol>	, , , , , , , , , , , , , , , , , , , ,						
Full Name Dalvi	i,d, M, A,c,u,f,f, , , , , , , , , , , , , , , , ,	1					
	[5,0,3, W, Hoppfice, Id, Dr. *203,	<u> </u>					
Mailing Address		<u> </u>					
	[A,r,I,i,n,g,t,on, H,e,i,g,h,t,s,] [I,L] [6,0,0	0041-171191					
Title or Position	CITY STATE	ZIP CODE					
1): hector	1	5 AL 17 A A DI					
0,1,1,6,6,6,0,1,	Telephone number [8,4,7]-[2	2,5,9,-[2,0,6,0]					
8. Treasurer: List the name a	nd address (phone number optional) of the treasurer of the committee; and the na	ame and address of					
any designated agent (e.g., assistant treasurer).							
Full Name TOH	NATIT	1					
of Treasurer ப்பார்	4051 S. SACRAMENTO						
Mailing Address							
	CHICAGO III GOG	23 <b>2</b> -L					
Title or Position	CITY STATE	ZIP CODE					
TREASURER	Telephone number 3121-6	27-11-109.09					

_	FEC Form	1 (Revised 02/2009)		Page 4	
	Full Name of Designated Agent	David, M. Acuff			
	Mailing Address	503 W Happfield Dr	<b>*</b> 203	<u>, , , , , , , , , , , , , , , , , , , </u>	
		Miriliangition Hier ghitis	IL STATE	6,0004-7,1,1,9 ZIP CODE	
	Title or Position	Telephone	number [	8,4,7]-[2,5,9]-[2,0,6,0]	
9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.					
		[B <sub>i</sub> a,n,k, of, P <sub>i</sub> a, I, a, t, I, n,e, , , , , , , , , , ] [O <sub>i</sub> n,e, E <sub>i</sub> a,s,t, N <sub>i</sub> o,r,t,h,w,e,s,t,	t .H.i.a.	b <sub>1</sub> w <sub>1</sub> > <sub>1</sub> y <sub>1</sub>	
	Mailing Address		1111191	171W 217	
		$[P_1 a_1 l_1 a_1 t_1 i_1 n_1 e_1]$	<u> </u>	6,0,06,7]-	
		CITY	STATE	ZIP CODE	
	Name of Bank, D	epository, etc.			
			1 1 1 1 1		
	Mailing Address	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 1 1 1 1		
	Maining Address	1			
				1 1-1	
			STATE	ZIP CODE	
		CITY	SIAIE	ZIP GODE	

## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing	to indicate how it was received.
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Overnight Delivery Service (Specify):	Shipping Date
N	ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Jan (3	10/26/10
PREPARER	DATE PREPARED

(3/2005)